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APPLICANTS

John P. Miller, Shelton, CT;  
 Michael M. Chen, Middletown, CT;  
 John V. Evans, Brookfield, CT;

\*\* CONTINUING DATA \*\*\*\*\*  
*None*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 12/04/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CT	SHEETS DRAWING 5	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 5
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

Pitney Bowes Inc.  
 Intellectual Property and Technology Law Dept.  
 35 Waterview Drive  
 P.O. Box 3000  
 Shelton, CT  
 06484

TITLE

Envelope flap moistening apparatus

FILING FEE  RECEIVED 1044	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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